

2:30 A. M. Bleeding has apparently been checked.

8:30 A. M. The baby looks much better, is breathing quietly and the heart sounds are much stronger. Bleeding from the cord is slight if any (the dressing was not disturbed.) The baby has continued to improve very rapidly in appearance now the hemorrhage has ceased.

March 1:—6 cc. of blood withdrawn for determination of coagulation factors shows:

Clotting time (Oxalated plasma)—18 minutes (Prothrombin).

Clotting time (Control)—7 minutes.

Clotting time (Recalcified plasma) Normal.

Clotting time (Recalcified plasma control)—Normal.

March 3:—No further cord hemorrhage has occurred, but there is still occult blood in the stools.

Résumé—Baby boy M., aged 2 days, entered the hospital at 2:30 A. M. on February 28th bleeding from the umbilicus for 1½ hours, blood having first been noticed in the binder at 1 A. M. The family history is entirely negative as regards bleeding or any chronic infection. The child was full-term and delivered after a normal pregnancy and labor—nothing abnormal had been noted for the first 28 hours of life. The bleeding then set in.

At entry there were already some signs of hemorrhage, pallor, and some weakness. The cord was oozing blood from its base—it had not yet separated. Pressure bandages both alone and with adrenalin failed to control the hemorrhage. A kephalin bandage served to check it slightly. Examination of the blood ten hours after entry showed an extreme deficiency, almost absence of prothrombin. Thirteen hours after entry the bandage was again soaked with blood and the baby was showing much more severely the effects of hemorrhage. Five hours later the baby was in such desperate condition that 10 cc. of citrated whole blood were given into the buttocks, together with 75 cc. salt solution hypodermically. In another hour 8 cc. whole blood were injected into the longitudinal sinus, and a final injection into the same area made 2½ hours after that of 35 cc. of whole blood. Undoubtedly if citrated blood had been given earlier the bleeding would have stopped much sooner. The bleeding was then apparently checked. Examination of the blood 36 hours later showed a normal prothrombin content. The baby rapidly recuperated and 5 days after entry was discharged in very good condition.

Wassermanns on the baby and mother were negative, on the father there was a triple positive reaction. Blood culture on the baby was negative—his blood picture was of a secondary anemia. Occult blood was present in the stools, but at no time was there macroscopic bleeding from the intestines or other mucous surfaces. A small conjunctival hemorrhage appeared shortly after entry, but was rapidly clearing at time of discharge. The urine contained no blood.

The question which cannot be answered in this case is whether the injections of whole blood controlled the hemorrhage, or whether they simply supported the child until spontaneous cessation of the hemorrhage could occur, the usual proceeding in untreated milder cases. The influence of the positive Wassermann reaction in the father is problematic in view of the negative reaction in the mother.

March 3:—Discharged.

Diagnosis:—Hemorrhagic Disease of the New-born.

Condition:—Improved.

Treatment:—Kephalin locally.

Citrated Blood.

1. 10 cc. intramuscular.

2. 43 cc. longitudinal sinus.

Department of Pharmacy and Chemistry

Edited by FELIX LENGFELD, Ph. D.

Help the propaganda for reform by prescribing official preparations. The committees of the U. S. P. and N. F. are chosen from the very best therapeutists, pharmacologists, pharmacognosists and pharmacists. The formulae are carefully worked out and the products tested in scientifically equipped laboratories under the very best conditions. Is it not plausible to assume that these preparations are, at least, as good as those evolved with far inferior facilities by the mercenary nostrum maker who claims all the law will allow?

FORMITOL TABLETS.—In a report of the Council on Pharmacy and Chemistry it was stated that Formitol Tablets of the E. L. Patch Company contained formaldehyd (or paraformaldehyd) and some hexamethylenamin, and that the formaldehyd (or paraformaldehyd) had been produced by the decomposition of the hexamethylenamin originally present in the tablets. The Council now reports that the Patch Company declares that no hexamethylenamin is used in the manufacture and that, therefore, that which was found must have been produced from the formaldehyd and ammonium chlorid in the tablets. The Council further reports that a printed sheet received from the Patch Company conveyed the information that Formitol Tablets contained ammonium chlorid, benzoic acid, citric acid, guaiac, hyoscyamus, menthol, paraformaldehyd and tannic acid, but gave no information as to the amounts of any of the ingredients except that each tablet was declared to represent 10 minims of a 1 per cent. formaldehyd solution. Because of the non-quantitative and, therefore, meaningless "formula" the A. M. A. Chemical Laboratory made an analysis of the tablets. The analysis indicated that the combined weight of all the claimed active ingredients is less than one grain per tablet. Formitol Tablets furnish a good illustration of some well-established truths: (1) "Formulas" that are non-quantitative are valueless or worse than valueless. (2) The fact that a manufacturer puts certain drugs in a mixture is no proof that these drugs are there when the mixture reaches the patient. (3) Complex mixtures should be avoided. It is absurd to expect, as is claimed in the case of Formitol Tablets, anodyne, antiseptic, astringent, expectorant and resolvent action, all at the same time (Jour. A. M. A., June 19, 1920, p. 1730).

It pays to advertise. The Council of Pharmacy and Chemistry of the A. M. A. has examined a number of brands of Acetylsalicylic acid (Aspirin) and found them to be fully up to the U. S. P. and in every way equal to the aspirin formerly furnished by the Bayer Company of Germany, and now furnished by their successors. It is not impossible that inferior brands of acetylsalicylic acid are on the market, but this will hold for practically everything and there is no difficulty in obtaining any of the standard brands. However, the public is led to believe by judicious advertising that all aspirin except the Bayer aspirin is impure and may even be largely talcum or some other inert substance, and it is also led to believe that the aspirin Bayer tablets are the only properly made tablets on the market, although no one can assure himself that there is any difficulty to obtain other tablets which disintegrate immediately upon being put into water.

Still, a very large proportion of the public insists upon Bayer's aspirin and Bayer's aspirin tablets, and it behooves the physician to help educate the public and to show that this is a fallacy.

Medicine Before the Bench

In this column will appear with appropriate comment, from month to month, court decisions